



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE DIVISIONAL PATENT APPLICATION OF:

DANNY D. BEAVER

U.S. SERIAL NO: 10/779,755

GROUP: 3726

FILED: FEBRUARY 17, 2004

EXAMINER: MARC QUEMUEL  
JIMENEZ

FOR: FORMING SERPENTINE HEAT EXCHANGERS  
FROM SPINE FIN TUBING

La Crosse, Wisconsin  
February 13, 2007

I hereby certify that this correspondence  
is being deposited with the U.S. Postal  
Service as First Class Mail in an envelope  
addressed to: Mail Stop Petition,  
Commissioner for Patents, P.O. Box 1450,  
Alexandria, VA 22313-1450 on  
*2/13/07*  
Date *William O'Driscoll*  
William O'Driscoll

REQUEST FOR THREE MONTH EXTENSION OF TERM FOR RESPONSE

Mail Stop Petition  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This is a request for a three month extension of time  
effectively extending the term for response from November 8, 2007 to  
February 8, 2007. Please charge Deposit Account 20-1434 any fees for  
this extension. A duplicate copy of this form is attached for that  
purpose.

Respectfully Submitted,

02/22/2007 LWONDIM1 00000013 201434 10779755

02 FC:1253 1020.00 DA

*William O'Driscoll*  
William O'Driscoll  
Registration No. 33,294

Telephone Number: (608) 787-2538

2007-02-08 00000013 201434 10779755  
1020.00 DA

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 06/28/07 2 Serial/Patent #: 10/779,755

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
X	Extension of Time 1253		02/21/07	\$ 1,020.00
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$

7 TOTAL AMOUNT OF REFUND \$ 1,020.00

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 2 0 -- 1 4 3 4

10 REASON:

Overpayment

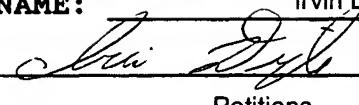
Duplicate Payment

X No Fee Due (Explanation):

The extension of time period is over; not extension fee is due.

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Irvin Dingle TITLE: Paralegal

SIGNATURE:  PHONE: 2-3210

OFFICE: Petitions

\*\*\*\*\* THIS SPACE RESERVED FOR FINANCE USE ONLY: \*\*\*\*\*

APPROVED:  DATE: 6/29/07

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B